## Application or Docket Number

E DETERMINATION RECORD 21790.00

## PATENT APPLICATION FEE DETERMINATION RECORD Effective January 1, 2003

| CLAIMS AS FILED - PAI<br>(Column 1)   |  |   |                  |                      | (Colur                                    | mn 2)                    |            | SMALL ENTITY TYPE  |                        |    | OTHER THAN OR SMALL ENTITY              |                        |  |
|---|--|---|------------------|----------------------|---|--------------------------|------------|--------------------|------------------------|----|---|------------------------|--|
| TOTAL CLAIMS  |  |   | 20               |                      |   |                          |            | RATE               | FEE                    | [  | RATE                                    | FEE                    |  |
| FOR   |  |   | NUMBER FILED     |                      | NUMB                                      | NUMBER EXTRA             |            | ASIC FEE           | 375.00                 | OR | BASIC FEE                               | 750.00                 |  |
| TOTAL CHARGEABLE CLAIMS   |  |   | Ominus 20=       |                      | * _                                       | *                        |            | X\$ 9=             |                        | OR | X\$18=                                  |                        |  |
| INDEPENDENT CLAIMS -  |  |   | minus 3 =        |                      | <u> </u>                                  | *                        |            | X42=               |                        | OR | X84=                                    | -                      |  |
| MU  | LTIPLE DEPEN                                   | DENT CLAIM PI                               | RESENT           |                      |   |                          |            | +140=              |                        | OR | +280=                                   |                        |  |
| * If  | the difference                                 | in column 1 is                              | less than ze     | ero, ente            | r "0" in c                                | "0" in column 2          |            | TOTAL              | 375                    | OR | TOTAL                                   | i.                     |  |
| CLAIMS AS AMENDED - PART II   |  |   |                  |                      |   |                          |            |                    | ,                      |    | OTHER                                   |                        |  |
|   | (Column 1) (Column 2) (Column                  |   |                  |                      |   |                          |            | SMALL E            | NTITY                  | OR | SMALL                                   |                        |  |
| AMENDMENT A   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT   |                  | NUM<br>PREVIO        | HEST<br>MBER<br>OUSLY<br>FOR              | PRESENT<br>EXTRA         |            | RATE               | ADDI-<br>TIONAL<br>FEE | 0  | RATE                                    | ADDI-<br>TIONAL<br>FEE |  |
|   | Total  | *   | Minus            | **                   |   | =                        |            | X\$ 9=             |                        | OR | X\$18=                                  |                        |  |
|   | Independent                                    | * NTATION OF M                              | Minus            | ***                  | T CL AIM                                  | =                        |            | X42=               |                        | OR | X84=                                    |                        |  |
| لبا   | FINOI PRESE                                    | NIATION OF W                                | ULHPLE DLI       | EINDEIA              | 1 OLANVI                                  |                          |            | +140=              | · · · · · ·            | OR | +280=                                   |                        |  |
|   |  |   |                  |                      |   |                          | <b>اسا</b> | TOTAL              |                        | OR | TOTAL<br>ADDIT. FEE                     |                        |  |
|   |  | AL  | DDIT. FEE        |                      |   | ADDIT, FEET              |            |                    |                        |    |   |                        |  |
| AMENDMENT B   |  | (Column 1) CLAIMS REMAINING AFTER AMENDMENT |                  | HIGH<br>NUM<br>PREVI | IMN 2)<br>HEST<br>MBER<br>IOUSLY<br>D FOR | (Column 3) PRESENT EXTRA |            | RATE               | ADDI-<br>TIONAL<br>FEE |    | RATE                                    | ADDI-<br>TIONAL<br>FEE |  |
|   | Total  | *   | Minus            | **                   | -   | =                        |            | X\$ 9=             | - 6                    | OR | X\$18=                                  |                        |  |
| AME   | Independent                                    | * NTATION OF M                              | Minus            | ***                  | T CL AINA                                 | =                        |            | X42=               |                        | OR | X84=                                    |                        |  |
| L   | FIRST PRESE                                    | NIAHON OF W                                 | . ULTIPLE DE     | PENDEN               | I CLAIIVI                                 |                          | ' [        | +140=              |                        | OR | +280=                                   |                        |  |
|   |  |   |                  |                      |   |                          | Ar         | TOTAL<br>DDIT. FEE |                        | OR | TOTAL<br>ADDIT. FEE                     |                        |  |
| A-  |  | (Column 1)                                  |                  | (Colu                | ımn 2)                                    | (Column 3)               | _          | JD11.1 CC 1        |                        |    | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |                        |  |
| AMENDMENT C   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT   |                  | HIGH<br>NUM<br>PREVI | HEST<br>MBER<br>TOUSLY<br>D FOR           | PRESENT<br>EXTRA         |            | RATE               | ADDI-<br>TIONAL<br>FEE |    | RATE                                    | ADDI-<br>TIONAL<br>FEE |  |
|   | Total  | *   | Minus            | **                   |   | =                        |            | X\$ 9=             |                        | OR | X\$18=                                  |                        |  |
|   | Independent                                    | *   | Minus            | ***                  | T OLAIN                                   | =                        |            | X42=               |                        | OR | X84=                                    | 1 1 6                  |  |
| L   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |                  |                      |   |                          | ¹          | +140=              |                        | OR | +280=                                   |                        |  |
| *   | If the entry in colu                           | ımn 1 is less than                          | the entry in col | umn 2, wri           | ite "0" in co                             | olumn 3.                 | L          | TOTAL              |                        | i  | TOTAL                                   |                        |  |
| ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |  |   |                  |                      |   |                          |            |                    |                        |    |   |                        |  |